PREVENTIVE MEDICINE PROGRAM SELF-CHECK LIST FOR AIRPAC SHIPS

DATE:

1. C-Status grading system.

C-Status:	<u>Criterion:</u>
C-1	All six sections received a SATISFACTORY (SAT) Score
C-2	One of six sections received a NEEDS IMPROVEMENT (N), while all other sections received a SAT
C-3	Two or three sections received an N, while all other sections receive a SAT
C-4	Any section received an UNSATISFACTORY (UNSAT), or four or more sections received an N.

- 2. Checklist grading system.
 - a. Two or more UNSAT marks on any asterisked items renders that section UNSAT
 - b. Five or more N marks on any asterisked item renders that section UNSAT
 - c. Ten or more N or five or more UNSAT marks (in items that are either asterisked or not asterisked), throughout a section renders that section UNSAT.

Note: The seven sections are:
Potable Water Sanitation
MSD
Habitability
Food Safety
Disease Surveillance, and
Pest Control
Medical Waste

DATE	Ξ:	S – SATISFACTORY N – NEEDS IMPROVEMENT U – UNSATISFACTORY N/A – NOT APPLICABLE
Sectio	n 1:	POTABLE WATER PROCEDURES
Ref:	(b) (c) (d) (e) (f) (g)	COMNAVAIRPAC 6000.2C Shipboard Medical Procedures Manual NAVMED P-5010 Manual of Preventive Medicine, Chapter 6 (Water Supply Afloat) Naval Ship's Technical Manual 533, Potable Water Systems GENSPECS 532, Fresh Water Service Naval Ship's Technical Manual, CH-505, Piping Systems GENSPECS, Section 505, Piping Systems Naval Ship's Technical Manual, CH-670, General Requirements for Stowage, Handling and Disposal of Hazardous General use Combustibles
OVER	RALI	MARK:
1. GF	ENEI	RAL
	a.	* A current water sanitation bill is published, to ensure procedures for receipt, transfer, treatment, storage, distribution, and surveillance are provided and followed. Ref (b), Art 6-55.
	b.	* There is a minimum trace halogen residual throughout the system. Ref (b), Art 6-52.2; Ref (c), Art 533-3.1.2-3.2; Ref (d), p. 5, Art 532.b2.
	c.	The Engineering and Medical department personnel have adequate knowledge of the ship's water system operation, maintenance, and disinfection procedures. Ref (b), Art 6-2.6 and 6-2.7.
	d.	The interior valve handwheels, operating levers, hose couplings, and sounding tube caps are color-coded dark blue. (color chip 15044). Ref (b), Art 6-19; Ref (e), 505-7.8.2 and Table 505-7-1; Ref (f), Table 506-16.
2. FI	LLIN	NG STATIONS:
	a.	Each filling station is clearly labeled with "POTABLE WATER ONLY" in one inch red letters at each filling station. Ref (c). Art 533-2 1.2: Ref (d). Art 532b2

	b.	Filling connections are at least 18 inches above the deck with receiving end turned down, and closed with a screw cap attached with a keeper chain. Ref (b), Art 6-8.2; Ref (c), Art 533-2.1.2.
	c.	* The deck riser hose connections and fittings are disinfected prior to hose hookup. Ref (b), Art 6-23.2; Ref (c), Art 533-3.5.2.3.
	d.	Warning labels are posted at each potable water hose connection stating "DISCONNECT HOSE WHEN NOT IN USE" in one inch red letters. Ref (c), Art 533-2.3.4; Ref (d), Art 532b2.
3. PO	TABI	LE WATER HOSES/HOSE LOCKERS:
	a.	The hose lockers are vermin proof, locked, mounted 18 inches of the deck, out of the weather if possible, and labeled "POTABLE WATER HOSE". Ref (b), Art 6-20.1; Ref (c), Art 533-2.1.3.
	b.	Printed instructions outlining step-by-step methods for disinfection of hoses and risers are posted inside the lockers. Ref (b), Art 6-20.1; Ref (c), Art 533-2.1.3.
	c.	Potable water hoses are marked "POTABLE WATER ONLY" at 10 foot intervals, are well maintained, and are stored with the ends coupled or closed with screw type caps. Ref (b), Art 6-19.3; Ref (c), Art 533-2.1.3.
	d.	* Hoses are disinfected for two minutes prior to initial use, or after becoming contaminated, and flushed for 15-30 seconds prior to hook up. Ref (b), Art 6-23.2.
	e.	* Hoses are used exclusively for potable water and are properly supported so they do not hang into the harbor water. Ref (b), Art 6-8; Ref (c), Art 533-2.1.1.
4. PO	TABI	LE WATER TANKS:
	a.	* Sounding tubes are equipped with caps attached to keeper chains, locked when not in use and properly labeled. Ref (b), Art6-8.3; Ref (c), Art 533-2.3.6.
	b.	Steel tapes or rods used as potable water sounding devices are color-coded dark blue or labeled "POTABLE WATER USE ONLY". Ref (b), Art 6-19.1.
	c.	* Sounding rods and/or tapes are disinfected prior to use (tapes: immersion in 100 ppm chlorine for two minutes, or wiped with a clean rag soaked in a disinfectant solution). Ref (b). Art 6-14.2

	d.	* The potable water air escape openings are covered with 18 mesh or finer non-corrosive metal screen, and do not terminate in foodservice spaces, medical spaces, heads, electrical spaces or weather decks. Ref (b), Art 6-12.
5. HA	ALOG	EN HANDLING AND SAFETY:
	a.	* Suitable personnel protective gear for handling bromine or HTH spills are readily available, including neoprene gloves, coveralls, and goggles. Ref (g), Art 670-5.3.3.
	b.	* The ready usage stock of calcium hypochlorite is not expired, is properly stowed in a locked, ventilated container, and does not exceed a 7 day supply. Ref (b), Art 6-21.1(2); Ref (g), Art 670-5.5.3.1.
	c.	* The stock storage of calcium hypochlorite is stowed in properly located lockers or bins with no more than 48 six ounce bottles per locker or bin. Ref (b), Art 6-21.1(3); Ref (g), Art 670-5.5.3.5.
	d.	Storage lockers and bins for calcium hypochlorite are labeled with red letters on a white background "HAZARDOUS MATERIAL, CALCIUM HYPOCHLORITE". Ref (b), Art 6-21.1(4); Ref (g), Art 670-5.5.3.7
6. RI	ECOR	DS AND TESTING:
	a.	The Medical department maintains a potable water log, with appropriate entries as specified in the NAVMED P-5010-6. As a minimum: date/time, location (at sea, harbor, name of port), sampling site, source of ships water (water barge, distilling apparatus, shore water), halogen residual, bacteriological analysis. Ref (b), Art 6-54.
	b.	* The Medical Department is responsible for measuring potable water halogen residuals daily, taken from 12 sampling sites which represent all parts of the potable water distribution system. Ref (a), Chap 16, Sec 2, 16302.c(2); Ref (b), Art 6-52.3; Ref (c), Art 533-4.3.2.
	c.	The Medical Department is performing weekly bacteriological analysis of potable water samples, to include 12 sites which are varied and represent all parts of the potable water distribution system, 1/4 of all potable water tanks, ½ of all ice machines. Ref (a), Chap 16, Sec 2, 16302.c(3); Ref (b), Art 6-53.2 and 6-53.3.
	d.	* The Medical Department procedures for performing halogen residual tests and bacteriological analysis of potable water are in accordance with Ref (b), Art 6-52 and 6-53.

	e.	Medical Department is conducting quarterly inspections of the potable water system. Ref (a), Chap 16, Sec 2, 16302.c(1).
	f.	* The Engineering department is performing required halogen residual testing. Ref (b), Art 6-52; Ref (c), Art 533-4.3.3.
		 (1) Daily on potable water tanks when in use. (2) Prior to receiving water on board. (3) A minimum of 30 minutes after initial halogenation has been accomplished. (4) As required when tanks are not in use to ensure minimum halogen residuals. (5) Prior to putting tanks in service. (6) In conjunction with weekly bacteriological testing, while hooked up to a US shore source.
7. BA	TTLE	DRESSING STATIONS:
	a.	* The emergency water tanks are drained and refilled quarterly with potable water containing at least a trace FAC or TBR. Ref (a), Chap 13, Sec 1, 13105.c; Ref (b), Art 6-32.2(a).
	b.	An instruction plate is installed on each tank with the following inscription: "BATTLE DRESSING STATION TANK IS TO BE FLUSHED AND REPLENISHED WITH POTABLE WATER EVERY (3) THREE MONTHS". Ref (a), Chap 13, Sec 1, 13105.c; Ref (d), Art 532b.
	c.	* Bacteriological tests of water from each emergency tank are conducted after filling and monthly thereafter. Ref (a), Chap IV, Sec 1, 4101.c; Ref (b), Art 6-32.2(c).
	d.	* Emergency 5-gallon potable water containers are labeled "WATER" on the exterior surface. Ref (b), Art 6-33.
	e.	* Emergency 5-gallon potable water containers are emptied, flushed, and refilled quarterly with potable water containing at least a trace FAC or TBR. Ref (b), Art 6-33.
* The	se iten	ns are highly significant

DATE	Ξ:	S – SATISFACTORY N – NEEDS IMPROVEMENT U – UNSATISFACTORY N/A – NOT APPLICABLE
Sectio	n 2:	MARINE SANITATION DEVICE (MSD)
Ref:	(b) (c) (d) (e) (f) (g) (h)	NAVSEAINST 9593.1B Certification Program for Sewage Marine Sanitation Devices (MSD) in the U.S. Navy Surface Ships and Craft GENSPECS, Section 593 Environmental Pollution Control Systems Naval Ship's Technical Manual, CH-593 Pollution Control GENSPECS, Section 507 Machinery and Piping Designating and Marking Naval Ship's Technical Manual, CH-505 Piping Systems NAVMED P-5010 Manual of Preventive Medicine, CH-7 Wastewater Treatment and Disposal Ashore and Afloat COMNAVAIRPACINST 6000.2C Shipboard Medical Procedures Manual OPNAVINST 5100.19D NAVOSH Program Manual for Forces Afloat CINCLANTFLT/CINCPACFLTINST 4790.3
TYPE	OF S	SYSTEM USED: <u>CHT</u>
OVER	RALL	MARK:
1. OF	PERA	ATIONS AND MAINTENANCE:
	a.	* Ship's CHT system presently holds a full certification. Ref (a), Para 5; Ref (i), Vol IV, Part I, Chap 9, 9.2.
	b.	* The CHT System is properly operated in accordance with the "Ships Sewage Disposal Operational System" (SSDOS) and other authoritative directives. Ref (a); Ref (c), 593-4.2.1.1.
	c.	The CHT system and components are in good condition. Ref (a); Ref (c), Sec 4.
		(1) No parts of the system are leaking (no residual on piping, deck, drip pans, or during paper towel tests). Ref (f), 7-18.2.
		(2) Properly labeled and color-coded equipment. Ref (f), 7-18.1.
	d.	A telephone connection to the ships internal communication system is provided in the pump room, at the continuously manned remote location where the high level alarm is located, and at deck discharge connections. Ref (c), Art 593-4.3.5.

	e.	CHT system interior valve handles and operating levers are color-coded gold (chip 17043). Ref (d), 507g; Ref (e), 505-7.8.2.2 and Table 505-7-1.
	f.	While at sea, the CHT holding tank shall be flushed and aerated once a week. The holding tanks shall be flushed for 30 minutes using the holding tank wash down system followed by 30 minutes of aeration. Ref (c), 593-4.6.1.6.3.d.
	g.	While in port, the holding tanks shall be washed down for 30 minutes after tanks are pumped down (emptied). Ref (c), 593-4.6.1.6.2.a.4.
2. PEI	RSON	AL PROTECTION AND SANITATION:
	a.	* Personal protective clothing and equipment are readily available, including coveralls, gloves, rubber boots, face shields, and hair covers and appropriate disinfectant, clean up and disposal supplies. Ref (a), Encl (3); Ref (c), Art 593-4.2.2.10 (a-l); Ref (f), Sec 3, Art 7-20; Ref (h), C1502.a.2.
	b.	* Fresh or salt water hose connections are provided to wash down pump room space; however if potable water is used, a vacuum breaker must exist in the line. Ref (a), Encl (3), Para IV.5; Ref (c), Art 593-4.2.2.8.
	c.	* Wash up facilities with potable water, soap, and hand drying fixtures are located in or near system pump rooms and other dedicated spaces. Ref (a), Encl (3), Para III.1; Ref (c) Art 593-4.2.2.7.
	d.	Personnel are thoroughly washing hands, lower arms, and face (in that order) with soap and water prior to smoking, eating, and drinking. Ref (h), C5102.a (3).
	e.	Health warning placards are posted in pump rooms and comminutor spaces. (i.e. wash thoroughly before leaving; no eating, drinking, or smoking; clean up procedures, hydrogen sulfide rescue procedures; caution label plates at each pump controller). Ref (a), Encl (3), Para VII, Encl (5), Para I.B.9, Encl (6), Para II.A.2; Ref (b), Art 593a; Ref (c), Art 593-4.2.1.3.4 and 4.2.2.9; Ref (f), Sec 7-23 e and f; Ref (h) C1502.a (6).
	f.	Personnel are not smoking, eating, or drinking in pump rooms, comminutor spaces, or when working on CHT components. Ref (f), 7-22.2.e.
	g.	Deck discharge stations are painted the same color as the surrounding structure, clearly identified, and have appropriate sanitation and hose handling label plates. Ref (b), Art 593a; Ref (d), Art 507g; Ref (e), 505-7.8.2.4.
	h	Diverter valves are labeled "to overboard" or "to CHT tanks". Ref (a), Encl (3), Para XVIII.2d.

5. TRAINING AND RECURDS:		
	a.	Indoctrination and annual health and safety training of CHT operators and maintainers is being done by the Medical Department. Ref (g), Chap 16, Sec 2, 16303.e(1); Ref (f), 7-21.2.b.
	b.	Basic immunizations (polio, tetanus, and diptheria) are current for personnel working with or exposed to sewage. Ref (f), 7-14.2; Ref (g), Chap 16, Sec 2, 16303.d.
	c.	Medical is conducting quarterly CHT system inspections. Ref (f), 7-21.2.a; Ref (g), Chap 16, Sec 2, 16303.c.
	d.	Preventive Medicine inspects all solid waste collection and processing sites, including plastic waste processing areas, for overall cleanliness and sanitation on a monthly basis. Ref (g), Chap 16, Sec 2, 16303.f.
4. SA	FETY	7:
	a.	* Two EEBD's are located in each pump room. Ref (c), 593-4.2.1.1(5); Ref (f), Sec 3, Art 7-23.2.c; Ref (h), C1502.b (7).
	b.	* CHT rooms are configured with slightly negative pressure ventilation, to include powered air supply and exhaust ventilation in accordance with GENSPECS Sec 512. Exhaust ventilation ducts should extend to within 9 inches of the deck. Ref (f), Sec 3, Art 7-23.2.a.
	c.	* Removable drip pans are located in health sensitive areas (food storerooms, food preparation or messing areas, medical and dental spaces, spaces where leakage can reach bilges contacting potable water tank boundaries, berthing spaces when valves are located above or adjacent to bunks). Ref (a), Encl (3), Para XVIII 3; Ref (c), Art 593-4.2.2.6; Ref (h), C1502.a (4-5).
	d.	The Engineering Department inspects the CHT system components for leaks regularly. All leaks, spills or other sources of contamination observed during the inspection or at any time must be promptly reported to the XO, CHENG, DCA and the SMO. Ref (c), 593-4.2.3.i; (f), Sec 3, 7-18.2 and 7.21.2(a); Ref (h), C1502.b (1).
	e.	* Appropriate (15 lb CO2) fire extinguishers are located in pump rooms. Ref (a), Encl (3), Para XX, Encl (5), Para I.b.4, Encl (6), Para II.a.11.

^{*} These items are highly significant

DATI	Е:	S – SATISFACTORY N – NEEDS IMPROVEMENT U – UNSATISFACTORY N/A – NOT APPLICABLE
Sectio	on 3:	HABITABILITY/HEADS & LIVING SPACES
Ref:	(b) (c) (d) (e) (f) (g) (h)	NAVMED P-5010 Manual of Naval Preventive Medicine, CH-2 OPNAVINST 9640.1A Shipboard Habitability Program GENSPECS 644 Plumbing Fixtures and Fittings GENSPECS 532 Freshwater Service Systems COMNAVAIRPACINST 6000.2C, Shipboard Medical Procedures Manual Naval Ship's Technical Manual, CH-655 Laundry Naval Ship's Technical Manual, CH-670 General Requirements for Stowage GENSPECS 671 Special Stowage Requirements OPNAVINST 5100.19D NAVOSH Program Manual for Forces Afloat
OVE	RALL	_ MARK:
1. G	ENE	RAL:
	a.	* The SMO or his representative conducts routine sanitation inspections of berthing areas, shower rooms, confinement facilities and gyms. The findings are reported to the CO with copies to the cognizant department heads, division officers, or LCPOs. Ref (a), Art 2-9, 2-10, 2-18, 2-33, 2-46; Ref (e), Chap 16, Sec 2, 16305.c(1).
2. BA	ARBE	ER SHOPS:
	a.	The barbershop is clean and well maintained. Ref (a), Sec II, Art 2-13.
	b.	Hair is promptly removed from the deck by a dustless method. Ref (a), Sec II, Art 2-15.
	c.	The sanitation regulations are conspicuously posted. Ref (a), Sec II, Art 2-18.
	d.	* Barbers receive a medical screening before initial assignment, and are excluded from attending patrons when they are ill with a communicable disease. Ref (a), Sec II, Art 2-12; Ref (e), Chap 16, Sec 2, 16305.d.
	e.	There is an adequate supply of hot and cold running water and the hot water temperature is between 120°F-140°F. Ref (a), Sec II, Art 2-13; Ref (d), Art 432b3.

	f.	There a sufficient supply of hand washing soap and paper towels available at each barber station. Ref (a), Sec II, Art 2-13.
	g.	The barbers wear clean smocks or freshly laundered over garments while attending patrons. Ref (a), Sec II, Art 2-12.
	h.	* Barbers wash their hands when required, including between patrons. Ref (a), Sec II, Art 2-12.
	i.	The barbers abstain from eating, drinking, or smoking while attending to patrons. Ref (a), Sec II, Art 2-15.
	j.	Clean, sanitary, covered receptacles are provided for waste material and used linen. Ref (a), Sec II, Art 2-15.
	k.	Covering cloths are clean and changed at least daily or more often when necessary. Ref (a), Sec II, Art 2-15.
	1.	Individual sanitary neck strips are used for each patron. Ref (a), Sec II, Art 2-15.
	m.	Disinfecting solutions are changed at least weekly or more frequently depending on patron load. Ref (a), Sec II, Art 2-16.
	n.	Removable and non-removable clipper heads are thoroughly cleaned and disinfected using an approved EPA spray. Ref (a), Sec II, Art 2-16.
	0.	Scissors, instruments, and combs are thoroughly washed with soap and water, then placed in a disinfecting solution or sprayed with an approved EPA disinfecting spray. Ref (a), Sec II, Art 2-16.
	p.	Chemically disinfected instruments are rinsed in running potable water before each use. Ref (a), Sec II, Art 2-16.
	q.	Common brushes and dusters are not used. Ref (a), Sec II, Art 2-16.
3. LA	UND	RY AND DRY CLEANERS:
	a.	* Pre-assignment and annual physicals are completed on personnel exposed to dry cleaning solvents. Ref (a), Sec IV, Art 2-32; Ref (e) Chap 16, Sec 2, 16305.d.
	b.	Spaces are maintained in a clean and sanitary condition free of water, slip hazards and clutter. Ref (a), Sec IV, Art 2-33, 2-40.
	c.	Covered containers are provided for trash. Ref (a), Sec IV, Art 2-33.

 d.	Separate areas are designated for clean and soiled laundry. Ref (a), Sec IV, Art 2-33.
 e.	Cooking, eating, smoking, and storage of food and drink is prohibited where laundry is handled. Ref (a), Sec IV, Art 2-33.
 f.	Frequent hand washing takes place, particularly after handling soiled laundry. Ref (a), Sect IV, Art 2-32.
 g.	A sanitary drinking fountain is provided in or near the laundry and dry cleaning plant. Ref (a), Sec IV, Art 2-33.
 h.	* Plumbing fixtures and equipment are maintained in good repair, free of cross connections, and kept in a sanitary condition. Ref (a), Sec IV, Art 2-33.
 i.	Lint screens are installed, in good condition, and are cleaned every four hours of operation or more frequently as needed. Ref (f), Art 655-1.10.7.18 and 1.10.7.19.
 j.	Chlorine bleach is properly stowed in a clean, dry area away from sources of heat and moisture. Ref (g), Art 670-5.6.1.
 k.	* Dry cleaning fluids are stored in adequately vented storage spaces. Ref (g), Art 670-3.2.3; Ref (h), Art 671b.
 1.	* Appropriate eye protection (chemical goggles) is available where dry cleaning fluid, bleach, and detergent splashes may occur. Ref (a) Sec IV, Art 2-36.6.
 m.	A permanent emergency eye wash stations is installed and properly maintained. Ref (a), Sec IV, Art 2-36.6; Ref (i), Art B0508.
 n.	* Automatic safety devices are functional and not bypassed. Ref (a), Sec IV, Art 2-36.7; Ref (f), Art 655-1.10.3.14, and 1.10.7.4.
 0.	* Dry bulb thermometers are placed in laundry spaces. Thermometers are read while the ship is underway or when potential heat-stress conditions exist while in port. Ref (i), Art B0204b(3).
	 (1) Every 4 hours for manned spaces if DB temperatures do not exceed 85°F. (2) Every hour for manned spaces if DB temperature exceeds 85°F.

(3) Every hour at temporary installations where the DBN temperature exceeds 85°F during repair or maintenance operations.

4. Bl	4. BERTHING:		
	_ a.	Berthing spaces are clean and uncluttered. Ref (a), Sec I, Art 2-4.	
	_ b.	Mattresses, bedding and furniture are clean and in good repair. Ref (a), Sec I, Art 2-4.	
	_ c.	Polyurethane pillows are prohibited. Ref (a), Sec I, Art 2-4.3.	
	_ d.	Adequate lighting and ventilation are provided. Ref (a), Sec I, Art 2-4.	
	e.	The bowl, orifice, and mouth guard of scuttlebutts are clean and sanitary. Ref (a), Sec I, Art 2-66.4.	
5. H	IEAD	S AND WASHROOMS:	
	_ a.	* Heads and washrooms are clean and well maintained. Ref (a), Sec I, Art 2-4.5.	
	_ b.	Showers are clean and free of mold, mildew, and soap scum. Ref (a), Sec I, Art 2 4.5.	
	_ c.	There is an adequate supply of hot and cold running water and the hot water temperature is between 120°F-140°F. Ref (d), Art 432b3.	
	_ d.	A functional soap dispenser, adequately supplied with soap, is provided in each washroom with three or more lavatories. Ref (c), Art 644e.	
	_ e.	Paper towel dispensers are provided and adequately supplied with paper towels. Note: hand dryers may augment but not replace paper towels. Ref(c), Art 644e.	
	_ f.	Urinals and water closets are in good condition, adequately supplied with toilet paper and free of urea scale. Ref (a), Sec I, Art 2-4.5.	
	g.	Heads and washrooms are adequately supplied with soap, paper towels and toilet paper. Ref (a), Sec I, Art 2-4.5.	
6. (GYMI	NASIUMS:	
	_ a.	* Quarterly inspections are conducted by the Medical Department. Ref (a) Sect VII, 2-46.	
	_ b.	* Equipment is of acceptable design and maintained in safe operating condition. Ref (a) Sect VII, 2-47.	

 c.	Floors are maintained in a clean and safe condition. Ref (a) Sect VII, 2-48.
 d.	Mats and other cushioning devices are adequately maintained and cleaned routinely Ref (a) Sect VII, 2-50.
 e.	Heads are maintained in a clean, sanitary manner with adequate soap, paper towels, and toilet tissue. Ref (a) Sect VII, 2-50.
 f.	A sanitary drinking fountain is provided in or near gym spaces. Ref (a) Sect VII, 2-51.

^{*} These items are highly significant.

DATE:		S – SATISFACTORY N – NEEDS IMPROVEME U – UNSATISFACTORY N/A – NOT APPLICABLE	
Sectio	n 4:	FOOD SAFETY	
Ref:	(b) (c) (d) (e)	COMNAVAIRPACINST 6000.2C Shipboard Medical Procedures Manual NAVMED P-5010 Manual of Naval Preventive Medicine CH-1 (Food Service Sanitation) NAVSUPINST 4061.11G Standards of Food Service NAVSUP PUB 421 Food Service Operations NAVSUP PUB 486 Food Service Management NAVSUP PUB 520 Enlisted Dining Facility Master-At-Arms Handbook	
OVE	RALL	L MARK:	
1. GI	ENEF	RAL:	
	a.	* Person In Charge is present at the food establishment during all hours of operafacilities categorized as risk type 3 or 4. Risk type 1 and 2 require on designated son in charge. Ref (b), Sec 2-1.1.	
	b.	* All food employees are medically screened for evidence of communicable disprior to initial assignment in food service. Ref (a), Chap 16, Sec 2, 16301.d; Re (b), Chap2, 2-2.2.	
2. TF	RAIN	NING:	
	a.	* Persons In Charge (PIC) have attended the Food Safety Managers/Supervisors Course. Ref (a), Chap 16, Sec 2, 16301.e(2); Ref (b), Sec 2-1.2.2.A.	
	b.	Food safety training is performed by certified food safety instructors. Ref (a), Chap 16, Sec 2, 16301.e(2); Ref (b), 2-1.2.2.C.	
	c.	* All food service employees (employees assigned in excess of 30 days) receive minimum of 4 hours initial food safety training. Ref (a), Chap 16, Sec 2, 16301.e(1); Ref (b), 2-1.2.2.B.a.	a
		(1) New food service personnel shall receive 4 hour training within the first 30 days of employment.	
		(2) Additional 4 hours of annual training.	

	d.	Current Food Safety Training Certificates (NAMED 4061/1) for each food employee, supervisor, and person in charge is kept on file by the PIC, at the work location. Ref (b), 2-1.2.2.C.d.		
	e.	* Temporary food service personnel assigned for 30 days or less receive 2 hours of initial training and orientation. Ref (a), Chap 16, Sec 2, 16301.e(1); Ref (b), 2-1.2.2.B.b.		
3. F(OOD E	STABLISHMENT INSPECTION REPORTS:		
	a.	Food establishments are inspected monthly, or at a frequency approved by the CO, but not less than quarterly. Ref (a), Chap 16, Sec 2, 16301.b(1); Ref (b), Section 6-1.1.		
	b.	Food safety inspections are thorough and complete. Ref (b); Ref (c); Ref (d); Ref (f).		
	c.	PMA's are verifying that critical violations have been corrected at the time of inspection or within 10 days of the initial routine inspection, and few repeat discrepancies are noted. Ref (a), Chap 16, Sec 2, 16301.b(2); Ref (b), NAVMED 6240/1 (Rev 12/97).		
* The	se iten	ns are highly significant.		
Belov	v is a s	ummary of the Food Establishment Inspection Reports.		
<u>C</u>	<u>ritical</u>	Non Critical Food Service Establishment		
a		Enlisted Galley and Mess		
b		CPO Galley and Mess		

Wardroom Galley and Mess

Flag Galley and Mess

Attached are the Food Establishment Inspection Reports (6240/1).

DATE:		S – SATISFACTORY N – NEEDS IMPROVEMENT U – UNSATISFACTORY N/A – NOT APPLICABLE		
Section	n 6: DISEASE PREVENTION			
Ref:	 Ref: (a) COMNAVAIRPACINST 6000.2C Shipboard Medical Procedures Manual (b) BUMEDNOTE 6230 Immunization Requirements and Recommendations (c) NAVMEDCOMINST 6224.8 Tuberculosis Control Program (d) BUMEDINST 6222.10A Sexually Transmitted Disease (STD) Clinical Manageme Guidelines (e) CDC 1998 Guidelines for Treatment of Sexually Transmitted Diseases (f) SECNAVINST 5300.30C Management of Human Immunodeficiency Virus (HIVINT Infection in the Navy and Marine Corps Screening Program Update (g) NAVMEDCOMINST 6230.1A Viral Hepatitis Prevention (h) BUMED MSG 242140Z MAY 96 Updated Guidance on use of Newly Licensed Hepatitis A Vaccine (i) NEHC TM6250.98 Navy Medical Department Pocket Guide to Malaria Prevention and Control (j) NAVMEDCOMINST 6230.2A Malaria Control and Prevention (k) NAVMEDCOMINST 6230.4 Rabies Prevention and Control (l) NAVMED P-5038 Control of Communicable Disease Manual 16th Ed., 1995 (m)NAVMEDCOMINST 6230.4 Department of the Navy (DON) Anthrax Vaccination Implementation Program 			
OVER	ALL MARK:			
1. HE	1. HEALTH CARE SYSTEM			
	a. A health care monitoring system exists for TB, STD Chap 16, Sec 2.	o's, and Immunizations. Ref (a),		
	 b. All required references are on board. Ref (a), Chap (1) Immunizations Ref (b). (2) Tuberculosis Ref (c). (3) Sexually Transmitted Disease Ref (d-f). 	VI, Sec 2, 6201.		

(4) Human Immunodeficiency Virus Infection Ref (f).

(5) Hepatitis Ref (g and h).(6) Malaria Ref (i and j).

(7) Rabies Ref (k).

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- (8) Food-borne Illness/Infection Ref (l).
- (9) Disease Surveillance Ref (m).

2. IMMUNIZATION PROGRAM

	a.	Immunizations are current. Ref (a), Chap 16, Sec 2, 16202.a; Ref (b).
	b.	Health record entries are accurate and complete. Ref (a), Chap 16, Sec 2, 16202.a(3)(c); Ref (b), 3.i.
	c.	* Medical/Dental personnel have documentation of measles, mumps and rubella (MMR) immunization or positive immune status. Ref (b), 6.g.
	d.	SAMS database system is utilized for tracking and reporting all routine immunizations IAW SECNAVINST 6230.4. IN addition ships utilize Shipboard Non-Tactical Automated Data Processing Program (SNAP) Automated Medical System (SAMS) for tracking, documenting, and submitting immunization compliance data up the chain of command. Ref (a), Chap 16, Sec 2, 1620.a(3)(a); Ref (b), 2.h.(1)(a).
	e.	Electronic transfer of all immunization data is required monthly (weekly for anthrax) to the Naval Medical Information Management Center (NMIMC). SAMS data may be submitted via floppy disk if electronic transfer is not possible. Ref (b), 2.h.(1)(a); Ref (n).
3. TU	JBER	CULOSIS PROGRAM
	a.	PPDs are given and read in a timely manner. Ref (c), Encl (1), 6b(3)(a).
	b.	* New reactors receive a baseline X-ray and liver function tests. Ref (c), Encl (1), 5b(2) and (3).
	c.	* New reactors receive a baseline HIV screening test. Ref (c), Encl (2), 5b(4).
	d.	INH chemoprophylaxis start and complete dates are documented. Ref (c), Encl (2), 8.
	e.	* Reactors receive an annual/monthly clinical TB screening evaluation. Ref (a), Chap 16, Sec 2, 16202.b(5); Ref (c), Encl (4), Para 2 and 3.
	f.	* The Annual Tuberculosis Summary record has been completed and maintained or file for at least three years with a copy to NEPMU-5. Ref (a), Chap 16, Sec 2, 16202.b(2); Ref (c), Encl 4.

4. \$	4. SEXUALLY TRANSMITTED DISEASES			
	_ a.	Personnel are familiar with current sexually transmitted disease treatment regimens. Ref (e).		
	_ b.	* Baseline RPR\VDRL and HIV testing is conducted on all STD patients. Ref (a), Chap 16, Sec 2, 16202.c(6); Ref (d), 4a and b; Ref (f) 6e.		
	_ c.	Follow-up RPR's are conducted when symptoms of syphilis or positive RPR's are found. Ref (d), 1b.		
	_ d.	* Personnel diagnosed with an STD receive a Hepatitis B Vaccine series (3 doses) with proper documentation in the Health Record. Ref (a), Chap 16, Sec 2, 16202.c(7); Ref (d), 4c.		
	_ e.	All relevant STD data is recorded in the patient's health record, STD log and/or SAMS system. Ref (a), Chap 16, Sec 2, 16202.c(2); Ref (m).		
	_ f.	Contact interviews are conducted, recorded, and the CDC form forwarded to the appropriate public health department. Ref (d), 7; Ref (m).		
5. (GENER	RAL PREVENTIVE MEDICINE		
	_ a.	MALARIA		
		(1) Personnel are familiar with the sources of current information on malaria prevention and control measures. Ref (j) and Ref (i).		
		(2) G6PD testing is complete on all personnel. Ref (i), Chap 5, p. 55.		
	_ b.	RABIES		
		(1) Personnel are knowledgeable in rabies prevention practices and treatment. Ref (a), Chap 16, Sec 2, 16202.d; Ref (l).		
	_ c.	MEDICAL EVENT REPORTS		
		(1) Medical Event Reports (MERs) are submitted as required. Ref (a), Chap 16, Sec 2, 16201; Ref (m).		
	_ d.	* HIV		
		(1) Annual HIV testing is conducted on all shipboard personnel. Ref (f), Para 6.		

(2) HIV test results	are recorded on the	appropriate form	(NAVMED	6000/2)	in the
Health Record.	Ref (f), Para 6f.				

____ e. * HEPATITIS

- (1) Personnel are familiar with Navy policy for preventing viral hepatitis infection. Ref (g), Para 4b, Page 2.
- (2) Medical/Dental/Fire personnel received their Hepatitis B immunizations. Ref (b), 6.d.(c).

^{*} These items are highly significant.

DATE:

S – SATISFACTORY

N – NEEDS IMPROVEMENT

U – UNSATISFACTORY

N/A – NOT APPLICABLE

Section 6: ENTOMOLOGY - PEST CONTROL & PESTICIDE SAFETY

Ref: (a) COMNAVAIRPACINST 6000.2C Shipboard Medical Procedures Manual

- (b) SECNAVINST 6210.2A Medical Service Quarantine Regulations of the Armed Forces
- (c) OPNAVINST 6250.4B Pest Management Programs
- (d) CINCPACFLTINST 5440.3H Chapter 10, Regulations for the Pacific Fleet
- (e) MANMED Article 22-37
- (f) NAVMED P-5010 Manual of Preventive Medicine
- (g) BUMEDINST 6250.12C Pesticide Applicator Testing and Certification for Medical Personnel
- (h) BUMEDINST 6250.14A Procurement of Deratting/Deratting Exemption Certificate
- (i) OPNAVINST 5100.19D Navy Occupational Safety and Health Program Manual for Forces Afloat (NAVOSH)
- (j) Naval Ships Technical Manual CH-670 Stowage, Handling, and Disposal of Hazardous General Use Consumables
- (k) NAVSUPPUB 421 Foodservice Operations
- (l) NAVSEA MANUAL 0964-000-2000 Lighting on Naval Ships
- (m) Navy-Wide Shipboard Pest Control Manual (DVECC Pub)
- (n) Armed Forces Pest Management Board Technical Information Memorandum No. 38

OVERALL MARK:		

1. ADMINISTRATION:

- a. All required references and relevant Material Safety Data Sheets (MSDS) are on board. Ref (i) Para B0302d.
 - (1) Quarantine Regulations of the Armed Forces. Ref (b).
 - (2) Pest Management Programs. Ref (c).
 - (3) Medical Entomology and Pest Control Technology. Ref (f).
 - (4) Navy-Wide Shipboard Control Manual. Ref (m).
 - (5) Pesticide Applicator Training and Certification for Medical Personnel. Ref (g).
 - (6) Procurement of Deratting/Deratting Exemption Certificates. Ref (h).
 - (7) Protecting Meals Ready to Eat (MREs). Ref (n).

	b.	PMT's maintain current category 8 Pest Control certification. Ref (a), Chap 16, Sec 2, 16304.a(4); Ref(g), p.2, 5.a.
	c.	* The corpsmen responsible for the pest control program are currently certified in shipboard pest control. Ref (a), Chap 16, Sec 2, 16304.a(3); Ref (f), Chap 8, Sec I, 8-6(1).
	d.	* Personnel using respirators have had a medical evaluation, fit testing, and received proper training. Ref (m), Chap 5.
	e.	* Annual Cholinesterase testing is done on all personnel working with organophosphate and carbamate pesticides. Ref (m), Chapter 5.
	f.	All pest control surveys, inspections and operations are properly recorded. Ref (a), Chap 16, Sec 2, 16304.a(3); Ref (m), Chap 4.
	g.	* The ship has a current USPHS Deratization Exemption. Ref (a), Chap 16, Sec 2, 16304.c(1);; Ref (d), pg 10-9, 10304.2; Ref (e), Chap 22, Sec X, Para 22-37.
2. PE	ST C	ONTROL MEASURES
	a.	Cockroach surveys are properly performed. Ref (f), Chap 8, Sec VI, Para 8-38(4)(e).
	b.	* Pesticides are properly applied. Ref (f), Chap 8, Sec II; Ref (m), Chap 5 and 6.
	c.	Approved rat guards are properly placed on all ship to shore lines. Ref (d), pg 10-10, Para 10311.b; Ref (h), Encl (2), pg 1-2, Para 1-3.
	d.	The ship is free of cockroach infestations. Ref (f), Chap 8, Sec VI, Para 8-38(4)(e).
3. PE	ST C	ONTROL EQUIPMENT AND MAINTENANCE
	a.	* NIOSH approved respirators are properly maintained and stored. Ref (i), Chap B6, Para B0609; Ref (m), Chap 5.
		(1) Inspected before and after each use.
		(2) Cleaned and sanitized according to manufacturer's instructions of per Ref (i), B0609b.
		(3) Cartridges/filters: Proper cartridge and installation, gaskets/threadings and connections in good condition. Unused cartridges are not expired and do not have evidence of prior use (sealed with manufacturer's original tape, foil,

etc.). (4) Stored flat in a clean, dry, uncontaminated area without crowding which may distort the respirator face piece, and stored in clean plastic bag or other sealed container. An approved pesticide sprayer is on board and in good repair. Ref (m), Chap 6. b Spare parts are available for sprayer maintenance. Ref (m), Chap 6. c. 4. SAFETY EQUIPMENT * Approved replacement combination cartridges or cartridges with pre-filters a. are on board. Ref (f), Sec IV, Para 8-21(2); Ref (i), Chap B6, Para B0604.a(4) and Appendix B6-D. * Approved solvent resistant gloves are on board. Ref (f), Sec IV, Para 8-21(6); b. Ref (j), 670-1.8; Ref (i), Chap B12, Para B1203.c(3); Ref (m), Chap 5. * Separate coveralls are used exclusively for pest control. Ref (f), Sec IV, Para 8c. 21(4)(c); Ref (j), 670-1.8; Ref (m), Chap 5. * Approved chemical goggles are on board. Ref (f), Sec IV, Para 8-21(3); Ref (i), d. Chap B12, Para B1203; Ref (j), 670-1.8; Ref (m), Chap 5. * Pesticide supplies are properly stored in a flammable storage locker. Ref (j); Ref e. (m), Chap 5. * An approved and properly labeled pesticide spill kit is on board. Ref (f), Sec IV, f. Para 8-23; Ref (i) 670-1.7 through 1.10; Ref (m), Chap 5. (1) Labeled "FOR PESTICIDE SPILLS ONLY" (2) 5 to 10 pound bag of absorbent material. (3) PPE (4) Dustpan (5) Brushes (dusting and scrub for detergent) (6) Plastic bags (7) Hazardous Waste Labels (8) Liquid Detergent 5. SUPPLY STOREROOMS

* Inspections of dry storerooms are properly performed. Ref (a), Chap 16, Sec 2,

16304.d(1); Ref (f), Chap 1, 3-4.4.c.

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a.

	b.	Items infested with stored product pests are isolated or disposed of properly. Ref (f), Chap 1, Sec 3, 3-1.2.6.
	c.	Inspections of pierside stores are properly performed. Ref (f), Chap 1, Sec 3, 3-1.3.
	d.	Dry stores are maintained in a clean and sanitary manner with no evidence of food spillage. Ref (f), Chap 1, Sec 3, 3-4.1.
	e.	Gratings and pallets are used properly to promote good air circulation. Ref (f), Chap 1, Sec 3, 3-4.1.
	f.	Storeroom bulkheads are lightly colored and made of easily cleanable material. Ref (k), Chap 2, Sec 2009.2.
	g.	Lighting in dry storerooms adequate and functioning. Ref (k), Chap 2, Sec 2009.3; Ref (l), Table 8-2.
	h.	Spoiled food items are absent from the dry storerooms. Ref (f), Chap 1, Sec 3, 3-1.2.1; Ref (k), Chap 1, Sec 1000-1008.
	i.	Items are properly stacked for rotation "First in, first out". Ref (f), Chap 1, Sec 3, 3-4.6.
	j.	Outdated food items extended by Army Veterinary Service when possible. Ref (f), Chap 1, Sec 3, 3-4.4; Ref (k), Chap 2, Sec 2009.
	k.	* The ship is free of rodent infestation. Ref (f), Chap 8, Sec VI, 8-44(5); Ref (k), Chap 1, Sec 1005, Chap 2, Sec 2008.
6. Ml	E AL, l	READY-TO-EAT RATIONS (MREs)
	a.	MREs are rotated every deployment. MREs have a 3 year shelf life under normal conditions. Rotation will return MREs to supply channels for reissuing and consumption. Ref (n), Part II, 2.D.
	b.	MREs are stacked no more than three pallets (preferably two) high to avoid crushing the cases at the base of the stack. Ref (n), Part II, 4.A.
	c.	MREs can be expected to experience temperature ranges that allow them to last for at least one year. However, temperature storage guidelines state for MREs: seven years at 60°F, five years at 70°F, four years at 80°F, thirty months at 90°F, and five months at 110°F. Ref (n), Part II, 4.C.

 d.	Receipt inspection of MREs are being conducted prior to loading onto ships. Only MREs in good condition and free of defects and infestations should be accepted. Ref (n), Part I, 9.D, and Part II, 5.B.
 e.	* MREs are not stacked over, or immediately adjacent to, petroleum products (oils grease, fuels, or solvents). Ref (n), Part II, 4.C.
 f.	A high degree of sanitation is maintained in MRE stowage areas. Ref (n), Part II, 5.A.

^{*} These items are highly significant.

DATE:			S – SATISFACTORY N – NEEDS IMPROVEMENT U – UNSATISFACTORY N/A – NOT APPLICABLE	
Sectio	on 7:	MEDICAL WASTE		
Ref:	 (a) COMNAVAIRPACINST 6000.2C Shipboard Medical Procedures Manual (b) OPNAV P-45-113-3-99 Afloat Medical Waste Guide (c) OPNAVINST 5090.1B Environmental and Natural Resources Program Manual 			
OVEI	RALI			
1. AI	OMIN	NISTRATION:		
	a.	 * Exposure control plan contains the following 1. Identifies those at risk of exposure. 2. Lists typical tasks involving potential infects identifies control measures to prevent or min 3. Lists post-exposure evaluation and follow up 4. Addresses communication of hazards to emp 5. Lists record keeping procedures. 	ious medical waste exposures and nimize exposure. p procedures.	
	b.	Personnel injured while handling infectious was area with soapy water if possible. Ref (b), IV.A	•	
	c.	* Personnel handling infectious medical waste medical clothing and PPE appropriate to the leanned PPE are removed prior to leaving the work or container until it can be properly laundered, (b), IV.A.4.	vel of risk they encounter. Clothing area and placed in a designated area	
	d.	* Personnel are not eating, drinking, or smokin medical infectious waste. Ref (b), IV.A.6.	ng while handling or being exposed to	
	e.	 The following safety precautions are used when Ref (c), 19-8.3.e. 1. Sharps are discarded into rigid, puncture resthat are labeled or color-coded. 2. Needles are not clipped, cut, bent, or recapped. 3. Sharps containers are closed when they are 3. 	sistant, autoclavable sharps containers ed.	

		4. Sharps are retained in proper containers on board for proper disposal ashore after autoclaving. Place sharps containers in a second container (plastic bag or rigid box) which is labeled or color-coded. Closed containers are collected and carefully transported to the treatment or storage site ashore.			
	f.	Personnel treat all human blood and certain human body fluids as if known to be infectious (Universal Precautions). Ref (b), IV.A.11.			
2. SPILL PROCEDURES:					
	a.	* Spill kit is located within the vicinity of sickbay (absorbent material, hospital grade disinfectant, biohazard bags, fluid resistant disposable overalls, gloves, boots, caps, protective face shield/mask, and tape for sealing wrists and ankles. Ref (b), IV.B.1.			
	b.	* Senior medical representative appropriately documents all spill incidents in the ship's medical log, including the date, time, location, and quantity of spilled material. Ref (b), IV.B.8.			
	c.	Personnel immediately report all exposure incidents that occur as the result of a spill or mishap cleanup to the responsible supervisor. The SMR assesses the risk of infection and appropriate medical follow-up action that may include booster shots. Ref (b), IV.A.3.			
3. P	ACK	AGING:			
	a.	* Infectious medical waste containers are labeled "BIOHAZARD". If standard preprinted biohazard bags or labels are not available, red containers marked with the universal biohazard symbol or the word "BIOHAZARD" are used. Ref (b), IV.C.1.			
	b.	Infectious medical waste is placed into a puncture resistant container or autoclavable plastic bag of sufficient thickness, durability, puncture resistance, and burst strength to prevent ruptures or leaks. Ref (b), IV.C.2.			
	c.	Sealed bags should be clearly marked and shall identify the generator, date of generation, and contents. Wet or leaking bags are double-bagged. Ref (b), IV.C.3.			
	d.	* Infectious medical waste containers are covered and sealed before and during transport to treatment and storage areas. Rigid or semi-rigid, leak-proof containers are used to transport infectious medical waste. Ref (b), IV, C.4.			
	e.	Anatomical pathology waste is placed into a double wall corrugated box or equivalent rigid container that is double lined with plastic bags for storage, transport and incineration, cremation, or burial by a licensed mortician. Ref (b), IV C 5			

3. STORAGE:			
	_ a.	Infectious waste is stored separately from all other hazardous materials. Ref (b), IV.E1.	
	_ b	* Infectious medical waste is stored in suitably marked containers in a designated storage area located near the sickbay but away from patient care, berthing or food service areas. Ref (b), IV.E.2.	
		1. Not stored in refrigerators, freezers, or other storage areas with medications, food or supplies.	
		2. Storage areas are clean.3. Universal biohazard symbol and the word "BIOHAZARD" is clearly visible on the outside of the storage area.	
		4. Access is limited to authorized personnel specifically designated to handle infectious medical waste.	
	_ c.	Storage time of untreated infectious medical waste (with no refrigeration capability) is kept to a minimum, not to exceed four days. Ref (b), IV.E.3.	
4.]	DISF	OSAL:	
	_ a.	In port, medical waste is delivered to a designated Navy Branch Medical Clinic or turned over to an authorized PWC contractor. Ref (a), Chap 16, Sec 3, 16306.d(1), Ref (b), IV.F.2.	
	_ b	Sharps containers are placed in a separate container from other waste (either a puncture resistant container or impervious plastic bag). Ref (b), IV.F.2.	
	_ c.	Blood, blood products, and other liquid infectious medical wastes may be discharged into the marine sanitation device, preferably through a laboratory sink. One sink is designated and labeled with a placard warning users to only dispose of blood, blood products, and liquid infectious waste when the ship is greater than 50 nautical miles from shore. Ref (b), IV.F.3; Ref (c), 19-8.3.i.	
5.	TRA	INING:	
	_ a.	* Personnel working with infectious medical waste or material contaminated with infectious waste receive annual training on all aspects of handling infectious medical waste to ensure they know how to protect themselves. Ref (a), Chap 16, Sec 3, 16306.g; Ref (b), IV.H.	
	_ b	* Newly assigned personnel review exposure control plan for training purposes. Ref (b), IV.A.1.	

6	RECORD	KEEPING:
v.	NECOND	KELLING.

a. * Medical is keeping an accurate Infectious Waste Log Book that contains the following information: date, type of waste, amount (volume or weight), storage location, and method of disposal. Ref (a), Chap 16, Sec 3, 16306.f.; Ref (b), IV.I; Ref (c), 19-8.3.h.

* These items are highly significant.